

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF KANSAS**

Plaintiff(s),

vs.

Case No. _____

Defendant(s).

**AFFIDAVIT OF FINANCIAL STATUS
IN SUPPORT OF APPLICATION FOR APPOINTMENT OF COUNSEL**

I, _____, declare that I am the plaintiff in the above entitled case and that I am financially unable to employ an attorney to represent me in this case.

I further declare that the responses I have made to the questions below and the information I have given relating to my ability to employ an attorney to represent me in this case are true.

1. MARITAL STATUS AND PERSONAL DATA:

A. Single: _____ Married: _____ Separated: _____ Divorced: _____

B. Spouse's Name: _____

C. My age: _____

D. Spouse's age: _____

E. My address: _____

My telephone: _____

F. Address of spouse: _____

Telephone of spouse: _____

G. State name or names of dependents who live with you, their age, address, relationship, and how much of their monthly support you provide:

2. EMPLOYMENT

A. Present employment: _____

Name of employer: _____

Address of employer: _____

Employer's telephone: _____

Length of employment: _____

Job title or description: _____

Net income: Monthly \$ _____ Weekly \$ _____

Gross Income: Monthly \$ _____ Weekly \$ _____

Does employer provide health insurance? Yes _____ No _____

If employer provides health insurance, describe coverage:

B. Previous employment (answer only if presently unemployed):

Name of employer: _____

Address of employer: _____

Employer's telephone: _____

Length of employment: _____

Job title or description: _____

Net income: Monthly \$ _____ Weekly \$ _____

Gross income: Monthly \$ _____ Weekly \$ _____

C. Employment of spouse:

Name of employer: _____

Address of employer: _____

Employer's telephone: _____

Length of employment: _____

Job title or description: _____

Net income: Monthly \$ _____ Weekly \$ _____

Gross income: Monthly \$ _____ Weekly \$ _____

3. FINANCIAL STATUS (Answer questions on behalf of both the plaintiff and spouse.)

A. Owner of real property?: Yes _____ No _____

If yes - Description: _____

Address: _____

In whose name?: _____

Estimated value: \$ _____

Total amount owed: \$ _____

Owed to: _____

Annual income from property \$ _____

B. Owner of automobile?: Yes _____ No _____

If yes, number of automobiles owned: _____

Make _____ Model _____ Year _____

Make _____ Model _____ Year _____

In whose name registered: _____

Present value \$ _____

Amount owed on the automobile(s) \$ _____

Owed to: _____

Monthly payment(s) \$ _____

C. Cash on hand: (Include checking and savings accounts)

\$ _____

List names and addresses of banks and associations including account number(s):

D. Have you received within the past 12 months any money from any of the

following sources?: Yes No

Rent payments, interest or dividends: _____

Pensions, trust funds, annuities or life

insurance payment: _____

Gifts or inheritances: _____

Welfare payments: _____

ADC or other governmental child support: _____

Unemployment benefits: _____

Social Security benefits: _____

Other sources: _____

- E. If the answer to any item in “D” above was “Yes”, describe each source of money and state the amount received from each in the past 12 months:

4. OBLIGATIONS

A. Monthly rental on house or apartment: \$ _____

B. Monthly mortgage payment on house: \$ _____

Amount of equity in house: \$ _____

C. Monthly mortgage payments on other properties: \$ _____

Amount of equity in other properties: \$ _____

D. Household expenses:

Monthly grocery expense: \$ _____

Monthly utilities:

Gas: \$ _____

Electric: \$ _____

Water: \$ _____

Other (Specify):

Type _____ Amount \$ _____

Type _____ Amount \$ _____

Type _____ Amount \$ _____

E. Other debts and miscellaneous monthly expenses:

To whom owed and for what reason incurred	Mthly. Pymt.	Balance Due
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

5. OTHER INFORMATION PERTINENT TO FINANCIAL STATUS

(Include information regarding stocks, bonds, savings bonds, either owned individually or jointly owned)

I understand that a false statement or answer to any question in this affidavit in support of my
Application for Appointment of Counsel will subject me to the penalties of perjury.

Signature of Plaintiff

Name (Print or Type)

Address

City	State	Zip Code
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Telephone number